Health Advisory:

Revised Directions for Using Rabies Immune Globulin (Human), HyperRAB™ S/D in Fixed Needle 2 mL Pre-filled Syringe

February 28, 2008

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Health Alerts convey information of the highest level of importance which warrants immediate action or attention from Missouri health providers, emergency responders, public health agencies, and/or the public.

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Health Advisory
February 28, 2008

FROM: **JANE DRUMMOND**
DIRECTOR

SUBJECT: **Revised Directions for Using Rabies Immune Globulin (Human), HyperRAB™ S/D in Fixed Needle 2 mL Pre-filled Syringe**

On February 26, 2008, the Centers for Disease Control and Prevention (CDC) issued a Health Advisory to address a recent notification from Talecris Biotherapeutics, Inc. that its Rabies Immune Globulin (Human), HyperRAB™ S/D in fixed needle 2 mL pre-filled syringe does not address all dosing situations. Specifically, the fixed needle (22 gauge, 1.25 inch) and the absence of graduations on the 2 mL pre-filled syringe do not permit administration of the recommended dose of Rabies Immune Globulin (Human), HyperRAB™ S/D in one or more of the following situations:

- A dose less than 2 mL is required (e.g. for pediatric use);
- A dose less than 2 mL must be injected over multiple sites; or
- An alternate needle (different length or gauge) is required based on the patient (adult or child), wound, or site of injection.

Three lots of HyperRAB™ S/D have been manufactured with the 2 mL pre-filled syringe configuration (see table below):

Lot Number	Expiration Date	Size/Container	NDC Number
26N87R1	Jan-26-2009	2 mL pre-filled syringe	13533-618-03
26N88K1	Jan-26-2009	2 mL pre-filled syringe	13533-618-03
26N9HP1	Feb-18-2010	2 mL pre-filled syringe	13533-618-03

Healthcare providers may continue to administer HyperRAB™ S/D supplied in the 2 mL pre-filled syringe by following the "Revised Directions for Use" that are packaged with these lots. The full "Revised Directions for Use" of these lots is provided, beginning on page 2 of this document. It is also available on-line at: http://www.talecris.com/us/documents/FINAL_FDA_Approved_Revised_Directions_for_Syringe_Use__21-FEB-08.pdf .

Talecris has discontinued manufacturing the HyperRAB™ S/D fixed needle, 2 mL pre-filled syringe.

For additional information regarding this product, please contact Talecris on-line at http://www.talecris.com, or call 919-412-1030, or toll free at 1-800-520-2807.

Human rabies PEP (post-exposure prophylaxis) is recommended when potentially infectious material (e.g. saliva) from a rabid animal is introduced via a bite, or comes into direct contact with broken skin or mucous membranes. More detailed information regarding evaluation for and administration of PEP is available at http://www.cdc.gov/mmwr/preview/mmwrhtml/00056176.htm.

Additional information about rabies and its prevention can be found on CDC's rabies homepage at http://www.cdc.gov/rabies, on the Missouri Department of Health and Senior Services (DHSS) website at http://www.dhss.mo.gov/Rabies, or by contacting Dr. Howard Pue at 573-751-6114 or 800-392-0272.

IMPORTANT SAFETY INFORMATION
Rabies Immune Globulin (Human), HyperRAB™ S/D
Revised Directions for Use of 2 mL Prefilled Syringe

This information replaces the Directions for Syringe Use in the DOSAGE AND ADMINISTRATION section of the Prescribing Information/Package Insert (Rev. August 2007) for Rabies Immune Globulin (Human), HyperRAB™ S/D). Please read the entire instructions before proceeding with administration of rabies immune globulin provided in the 2 mL prefilled syringe.

The fixed needle (22 gauge, 1.25 inch) and the absence of graduations on the 2 mL prefilled syringe do not permit administration of the recommended dose in one or more of the following situations:

- **A dose < 2 mL is required (e.g. for pediatric use)**
- **A 2 mL (or less) dose must be injected over multiple sites**
- **An alternate needle (different length or gauge) is required based on the patient (adult or child), wound and site of injection.**

These revised directions provide instructions for administering product when such situations exist.

These Directions for Use are applicable to the following lots of Rabies Immune Globulin (Human), HyperRAB™ S/D:

Lot Number	Expiration Date	Size/Container	NDC Number
26N87R1	Jan-26-2009	2 mL prefilled syringe	13533-618-03
26N88K1	Jan-26-2009	2 mL prefilled syringe	13533-618-03
26N9HP1	Feb-18-2010	2 mL prefilled syringe	13533-618-03

DOSAGE AND ADMINISTRATION

The recommended dose for Hyper**RAB™** S/D is 20 IU/kg (0.133 mL/kg) of body weight given preferably at the time of the first vaccine dose.[1] [T]It may also be given through the seventh day after the first dose of vaccine is given. If anatomically feasible, up to the full dose of Hyper**RAB™** S/D should be thoroughly infiltrated in the area around the wound and the rest should be administered intramuscularly in the deltoid muscle of the upper arm or lateral thigh muscle.[2] Hyper**RAB™** S/D should never be administered in the same syringe or needle or in the same anatomical site as vaccine.

Parenteral drug products should be inspected visually for particulate matter and discoloration prior to administration, whenever solution and container permit.

Please follow instructions on the following pages for proper use of syringe with UltraSafe® Needle Guard.

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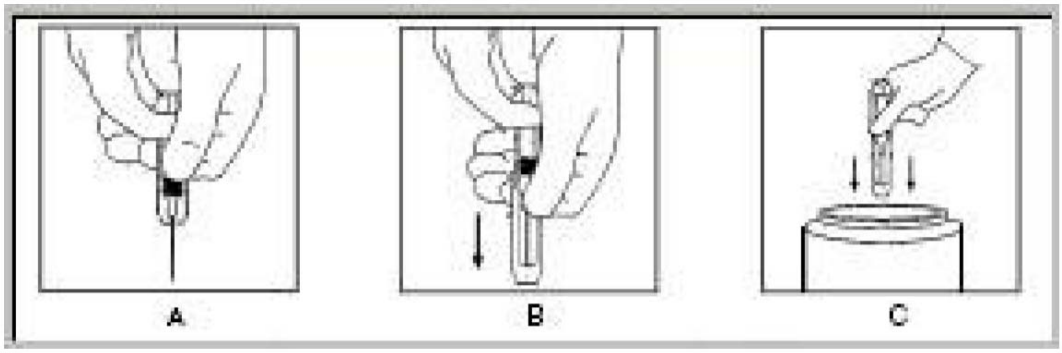
[1] Refer to references 8 and 9 in the package insert (Rev. August 2007) accompanying the product.

[2] Recommendations of the Advisory Committee on Immunization Practices (ACIP) and the American Academy of Family Physicians (AAFP): General recommendations on immunization. *MMWR* 2002: 51(RR02), 1-36.

Directions for Syringe Use

A. Directions for Use for Delivery of Dose Less Than 2 mL (< 2 mL) or for Dose Delivery at Multiple Injection Sites, and/or Requirement to Use Different Needle Size than Supplied with HyperRAB™ S/D.

1. Remove the prefilled syringe and plunger rod from the package.
2. Insert the threaded end of the plunger rod into the syringe barrel.
3. Twist the plunger rod clockwise until the threads are seated.
4. With the rubber needle shield secured on the syringe tip, push the plunger rod forward a few millimeters to break any friction seal between the rubber stopper and the glass syringe barrel.
5. Using standard aseptic technique[3], transfer the entire contents of the prefilled syringe into a sterile graduated syringe (or into a sterile vial from which product can be aseptically aspirated into a sterile graduated syringe).
   Do NOT attempt to penetrate the syringe barrel stopper to withdraw product from the prefilled syringe. Effective disinfection of the stopper cannot be assured due to the threaded configuration of the stopper.
6. Expel any air bubbles. A sterile needle[4] should be used for injection of the product. If administering a **dose less than 2 mL**, use the graduations on the syringe to monitor the volume of medication being injected.
7. Proceed with the hypodermic needle puncture as soon as possible.
8. Aspirate prior to injection to confirm that the needle is not in a vein or artery.
9. Inject the medication. **For multi-site injection**: If injecting into multiple sites (multiple infiltration sites around the wound; multiple wounds; remainder of dose intramuscularly in deltoid or lateral thigh muscle), the needle should be replaced with a new sterile needle after each injection.
10. To properly dispose of the 2 mL syringe in which the medication was supplied, while keeping your hands behind the needle, grasp the guard with free hand and slide forward toward needle until it is completely covered and guard clicks into place. If audible click is not heard, guard may not be completely activated (See Diagrams A and B below).
11. Place entire prefilled syringe with guard activated into an approved sharps container for proper disposal. (See Diagram C below).

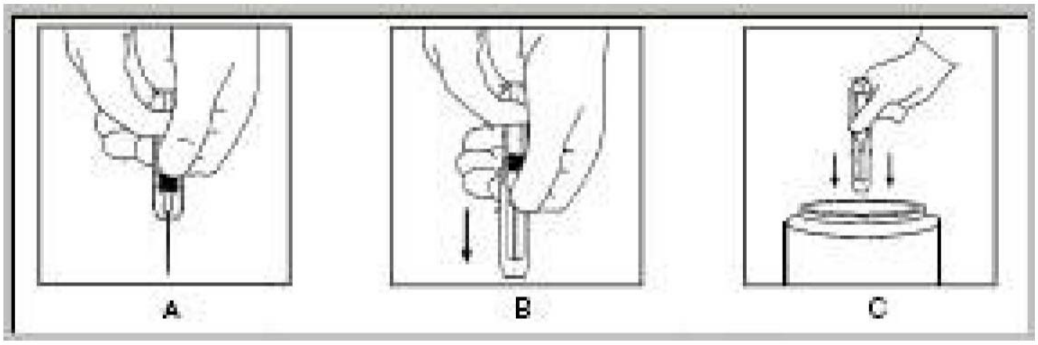


[3] Applicable hospital, pharmacy and/or nursing guidelines in place at the treating facility should be used. The use of a Laminar Air Flow cabinet or other clean area environment is recommended.

[4] In accordance with standard procedures, the length and gauge of the needle should be chosen based on patient, wound and injection site.

B. Directions for Use for Delivery of Entire 2 mL Product Volume at Single Injection Site Where Use of 22 Gauge, 1.25 inch Needle Is Appropriate

1. Remove the prefilled syringe and plunger rod from the package.
2. Insert the threaded end of the plunger rod into the syringe barrel.
3. Twist the plunger rod clockwise until the threads are seated.
4. With the rubber needle shield secured on the syringe tip, push the plunger rod forward a few millimeters to break any friction seal between the rubber stopper and the glass syringe barrel.
5. Remove the needle shield and expel air bubbles. (Do not remove the rubber needle shield to prepare the product for administration until immediately prior to the anticipated injection time).
6. Proceed with hypodermic needle puncture.
7. Aspirate prior to injection to confirm that the needle is not in a vein or artery.
8. Inject the medication.
9. Keeping your hands behind the needle, grasp the guard with free hand and slide forward toward needle until it is completely covered and guard clicks into place. If audible click is not heard, guard may not be completely activated (See Diagrams A and B below).
10. Place entire prefilled syringe with guard activated into an approved sharps container for proper disposal. (See Diagram C below).



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